04. Health procedures

04.06 Oral health

Stepping Stones Preschool provides care for children and promotes health through promoting oral health and hygiene, encouraging healthy eating, healthy snacks and tooth brushing.

- All children are required to bring a full water bottle daily which they have access to at all times.
- Weak squash may be served to avoid dehydration, especially during periods of hot weather..
- In partnership with parents, babies are introduced to an open free-flowing cup at 6 months and from 12 months are discouraged from using a bottle.
- Only water and milk are served with morning and afternoon snacks.
- Children are offered healthy nutritious snacks with no added sugar.
- Parents are discouraged from sending in confectionary as a snack or treat.
- Staff follow the Infant & Toddler Forum's Ten Steps for Healthy Toddlers.

Oral health is an important part of children's overall wellbeing at Stepping Stones Preschool. Good oral hygiene supports children's comfort, confidence, speech development, nutrition, and readiness to learn. We aim to promote positive oral health habits and provide a safe, supervised daily toothbrushing routine that meets children's individual needs.

Brushing teeth with fluoride toothpaste twice daily is highly effective in preventing tooth decay. As stated in the supervised toothbrushing guidance:

"Brushing teeth with fluoride toothpaste last thing at night and one other time in the day is highly effective in preventing tooth decay."

We work in partnership with parents, carers, and the Oral Health Improvement Team to ensure children receive consistent oral health messages both at home and in the setting.

Recording and Meeting Children's Oral Health Needs

Staff discuss and record children's oral health needs, including:

- Dental registration details
- Any oral health concerns shared by parents
- Cultural or religious considerations relating to oral hygiene
- Temporary exclusions (e.g., cold sores, oral ulceration)

This information is recorded on the child's registration form and updated through ongoing dialogue with parents. As stated in the guidance:

"Informed consent for each participating child is essential… Consent can be withdrawn by the parent/legal guardian at any time."

Up-to-date information about children's participation in the supervised toothbrushing programme is displayed for staff so that all practitioners are fully informed.

Supervised Toothbrushing Programme

Stepping Stones Preschool participates in the Community Dental Services supervised toothbrushing programme. This involves children brushing once a day with fluoride toothpaste under the supervision of trained staff. This does not replace toothbrushing at home.

Consent

- Parents receive an information letter and complete a permission slip.
- Consent is stored in the child's personal file.
- Parents may withdraw consent at any time.

Daily Practice

Staff ensure:

- Each participating child brushes once per day.
- Fluoride toothpaste containing **1,350–1,500 ppm** is used.
- A **smear** of toothpaste is used for children under 3; a **pea-sized amount** for children aged 3–6.
- Children are supervised at all times.
- Children **spit but do not rinse** after brushing.
- Toothbrushes are individually identifiable and never shared.
- Toothbrushes are replaced termly or sooner if splayed or dropped.

The guidance states:

"Children should be discouraged from swallowing toothpaste… After brushing children spit out residual toothpaste and don't rinse."

Recording

Staff complete the daily toothbrushing register, noting:

- Participation
- Refusals (with reason)
- Absences
- Cold sores/oral ulceration
- Brush replacements

This ensures full quality assurance and supports safeguarding oversight.

Infection Prevention and Control

Staff follow strict infection control procedures during toothbrushing sessions. The guidance states:

"Toothbrushes are rinsed thoroughly and individually under cold running water… toothbrushes should not be washed together in the sink."

Key IPC measures include:

- Supervisors and children wash hands before and after brushing.
- Toothpaste is dispensed onto a clean plate or paper towel.
- Toothbrushes must not touch each other at any time.
- Brushes are rinsed individually under cold running water.
- Brushes are stored upright in ventilated storage systems with lids.
- Storage systems are cleaned weekly with hot soapy water.

- Dropped toothbrushes are discarded immediately.
- Brushing takes place in a cleanable area (not on carpet).
- Sinks are cleaned after each session using standard detergents.

Children with oral infections, cold sores, or ulceration are temporarily excluded from the programme but continue brushing at home.

Cultural and Individual Needs

Staff show sensitivity when supporting children's oral health needs. A child's oral health requirement is never used as a label, and children are not made to feel singled out.

Staff work in partnership with parents to:

- Support children who are reluctant to brush.
- Provide additional help for children with SEND or sensory needs.
- Ensure oral health routines respect cultural or religious practices.

Partnership with Parents

Parents are encouraged to:

- Brush their child's teeth twice daily at home.
- Register their child with a dentist.
- Share any oral health concerns with staff.
- Inform the setting of changes to their child's oral health needs.

Parents can request support or advice from the Oral Health Improvement Team via the setting.

Training and Quality Assurance

All staff involved in the programme complete training delivered by the Oral Health Improvement Team. Training includes effective practice and infection prevention control.

Performance is monitored every 3 months or annually using the Quality Assurance Form.

The guidance states:

"Performance is monitored once every 3 months or annually… Training is recorded and monitored."

Children Who Are Reluctant to Brush

Children who show reluctance or sensory aversion are supported sensitively. They are not forced to brush. Staff recognise signs of distress and work with parents to support gradual participation

Pacifiers/dummies

- Parents are *advised* to stop using dummies/pacifiers once their child is 12 months old.
- Dummies that are damaged are disposed of and parents are told that this has happened

Further guidance

Infant & Toddler Forum: Ten Steps for Healthy Toddlers www.infantandtoddlerforum.org/toddlers-to-preschool/healthy-eating/ten-steps-for-healthy-toddlers/

Policies & Procedures for the EYFS 2025/26 (Early Years Alliance 2025)